

3763

Patent
267/121

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Richard Ginn

Serial No.: 10/006,400

Filed: November 30, 2001

For: Apparatus and Methods for Providing
Tactile Feedback While Delivering a Closure
Device

Group Art Unit: 3763

Examiner: Not yet assigned

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JUL 22 2002

TECHNOLOGY CENTER R3700

AMENDMENT TRANSMITTAL

Box Non-Fee
Commissioner for Patents
Washington, D.C. 20231

Sir:

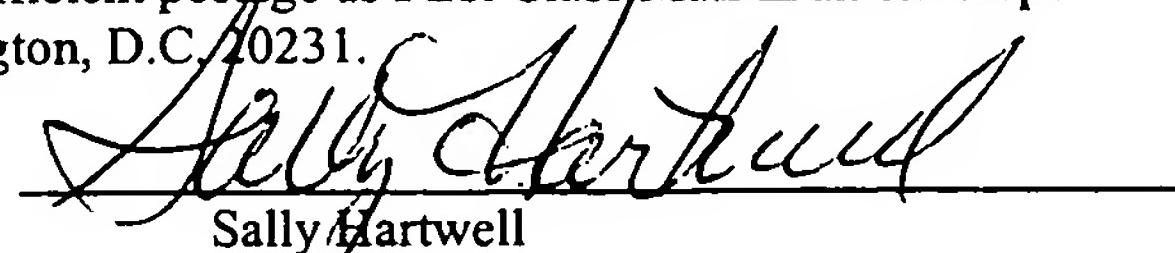
Transmitted herewith is an Amendment for the above-identified application.

 Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/> \$55.00	<input type="checkbox"/> \$110.00
2 months	<input type="checkbox"/> \$200.00	<input type="checkbox"/> \$400.00
3 months	<input type="checkbox"/> \$460.00	<input type="checkbox"/> \$920.00
4 months	<input type="checkbox"/> \$720.00	<input type="checkbox"/> \$1,440.00
5 months	<input type="checkbox"/> \$980.00	<input type="checkbox"/> \$1,960.00

 An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this Request _____. If an additional extension of time is required, please consider this a petition therefor.CERTIFICATE OF MAILING
(37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

July 11, 2002
Date of Deposit
Sally Hartwell

FEES FOR CLAIMS:

Applicant claims small entity status pursuant to 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	38	-	56	=	0	x	\$18.00	\$0.00
Independent Claims	5	-	6	=	0	x	\$84.00	\$0.00
Multiple Dependent Claims	\$280	(if applicable)				<input type="checkbox"/>		\$0.00
TOTAL OF ABOVE CALCULATIONS								\$0.00
Reduction by ½ for Filing by Small Entity.								\$0.00
Note 37 CFR §§ 1.9, 1.27, 1.28.								<input checked="" type="checkbox"/>
TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH								\$0.00

- A check in the amount of _____ is enclosed to cover the above fee(s).
- Charge Lyon & Lyon's Deposit Account No. 12-2475 in the amount of _____.
- The Commissioner is authorized to charge Lyon & Lyon's Deposit Account No. 12-2475 for any fees required under 37 CFR §§ 1.16 and 1.17 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account 12-2475.

Respectfully submitted,

LYON & LYON LLP

By:


William A. English
Reg. No. 42,515

Dated: July 11, 2002

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